

FIG. 3

T-Chart		User rlangdon									
Grace		File Edit View Setup									
My Home		My Patients									
Annotations		Room	Age	Sex	Chief Complaint	Name	Time	Template	Physician		
L S		7	63y	F	car drove off cliff	Grace	11:26	04/12/01	17 MVA	langdon	
Notes		12	18m	M	bean in nose	Ricky	15:44	04/12/01	28 Nose	langdon	
Clinical											
History											
Exam											
Course											
Dx/DI											
Viewing											
Report											
Discharge											
Prescription											
Excuse											
Printing											
Clinical											
Discharge											
Closure											
ID											

Patients Waiting										
Room	Age	Sex	Chief Complaint	Name	Time	Template	Physician			
			NEW COMPLAINT	NEW PATIENT						
49y	F		horse stepped on foot	Ethyl	16:37	04/12/01				
118y	F		headache	Mary	16:26	04/12/01				
56y	M		car crash	Ernie	16:18	04/12/01				
29y	M		abdominal pain	Jack	15:26	04/12/01				
37y	M		chest pain	Desi	15:04	04/12/01				

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FIG. 4

T-Chart		User rlangdon									
Grace		File Edit View Setup									
My Home		My Patients									
Annotations		Room	Age	Sex	Chief Complaint	Name	Time	Template	Physician		
L S		7	63y	F	car drove off cliff	Grace	11:26	04/12/01	17 MVA	langdon	
Notes		12	18m	M	bean in nose	Ricky	15:44	04/12/01	28 Nose	langdon	
Clinical											
History											
Exam											
Course											
Dx/DI											
Viewing											
Report											
Discharge											
Prescription											
Excuse											
Printing											
Clinical											
Discharge											
Closure											

Patients Waiting										
Room	Age	Sex	Chief Complaint	Name	Time	Template	Physician			
	49y	F	NEW COMPLAINT	NEW PATIENT	16:37	04/12/01				
	118y	F	horse stepped on foot	Ethyl	16:26	04/12/01				
	56y	M	headache	Mary	16:18	04/12/01				
	37y	M	car crash	Ernie	15:04	04/12/01				
	29y	M	chest pain	Desi	04/12/01	3 2				
			abdominal pain	Jack						

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FIG. 5

T-Chart		User rlangdon									
Jack	File Edit View Setup										
My Home	My Patients										
Annotations	Room	Age	Sex	Chief Complaint	Name	Time	Template	Physician			
Notes	7	29y	M	abdominal pain	Jack	15:26	04/12/01	langdon			
Clinical	12	63y	F	car drove off cliff	Grace	11:26	04/12/01	17 MVA	langdon		
Clinical History		18m	M	bean in nose	Ricky	15:44	04/12/01	28 Nose	langdon		
Exam											
Course											
Dx/DI											
Viewing											
Report											
Discharge											
Prescription	Room	Age	Sex	Chief Complaint	Name	Time	Template	Physician			
Excuse		49y	F	NEW COMPLAINT	NEW PATIENT						
Printing		118y	F	horse stepped on foot	Ethyl	16:37	04/12/01				
Clinical		56y	M	headache	Mary	16:26	04/12/01				
Discharge		37y	M	car crash	Ernie	16:18	04/12/01				
Closure				chest pain	Desi	15:04	04/12/01				

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FIG. 6

User rlangdon										<input type="button" value="X"/> <input type="button" value="F5"/> <input type="button" value="F6"/>	
<div> <div>File</div> <div>Edit</div> <div>View</div> <div>Setup</div> <div></div> <div></div> <div></div> <div></div> </div>											
My Patients											
Room	Age	Sex	Chief Complaint	Name	Time	Template	Physician				
7	63y	F	car drove off cliff	Grace	11:26 04/12/01	17 MVA	langdon				
8	29y	M	abdominal pain	Jack	15:26 04/12/01		langdon				
12	18m	M	bean in nose	Ricky	15:44 04/12/01	28 Nose	langdon				
Patients Waiting											
Room	Age	Sex	Chief Complaint	Name	Time	Template	Physician				
			NEW COMPLAINT	NEW PATIENT							
49y	F		horse stepped on foot	Ethyl	16:37 04/12/01						
118y	F		headache	Mary	16:26 04/12/01						
56y	M		car crash	Ernie	16:18 04/12/01						
37y	M		chest pain	Desi	15:04 04/12/01						

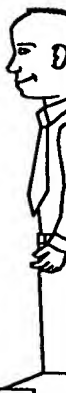























T-Chart	Jack	<input type="button" value="Home"/> <input type="button" value="Annotations"/> <input type="button" value="Notes"/> <input type="button" value="Clinical"/> <input type="button" value="History"/> <input type="button" value="Exam"/> <input type="button" value="Course"/> <input type="button" value="Dx/DI"/> <input type="button" value="Viewing"/> <input type="button" value="Report"/> <input type="button" value="Discharge"/> <input type="button" value="Prescription"/> <input type="button" value="Excuse"/> <input type="button" value="Printing"/> <input type="button" value="Clinical"/> <input type="button" value="Discharge"/> <input type="button" value="Closure"/> <input type="button" value="Print"/>
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FIG. 7

T-Chart Template Selector			
Trauma		Medicine	
	1 Head Injury	26 Headache	
	2 Eye Problems	27 Ear Complaints	
	3 head Injury, Facial	28 Nose	
	4 Neck/Back Pain or Injury	29 Throat or Dental Pain	
	5 Shoulder Injury	30 Cough	
	6 Upper Extremity Injury	31 Wheezing/Asthma	
	7 Trunk Injury	32 Dyspnea	
	8 Low Back Pain or Injury	33 Chest Pain	
	9 Hand/Wrist Injury	34 Palpitations	
	10 Hip Injury	35 Upper Extremity Pain	
	11 Lower Extremity Injury	36 Abdominal Pain	
	12 Ankle/Foot Injury	37 Vomiting/Diarrhea	
	13 Plantar Puncture Wound	38 GI bleeding/Rectal Pain	
	14 Pediatric Illness	39 Female GU	
	15 Asthma-pediatric	40 OB Problems	
	16 Pediatric trauma	41 Male GU	
	17 MVA	42 Lower Extremity Pain	
	17a MCA Bike/Pedestrian	43 Skin Rash/Abscess	
	18 Multiple trauma	44 Allergy	
	19 Fall	45 Changed Mental Status	
	20 Assault	46 Focal Neuro Deficit	
	21 Animal Bite	47 Dizzy	
	22 Major Burn/Smoke Inhalation	48 Syncope	
	23 Recheck/Suture Removal	49 Seizure	
24 General	50 CPR		
	51 Critical Care		
	52 Overdose		
	53 Psych		

Ok Cancel

FIG. 8

T-Chart Template Selector	
Trauma	Medicine
      	                
1 Head Injury 2 Eye Problems 3 head Injury, Facial 4 Neck/Back Pain or Injury 5 Shoulder Injury 6 Upper Extremity Injury 7 Trunk Injury 8 Low Back Pain or Injury 9 Hand/Wrist Injury 10 Hip Injury 11 Lower Extremity Injury 12 Ankle/Foot Injury 13 Plantar Puncture Wound 14 Pediatric Illness 15 Asthma-pediatric 16 Pediatric trauma 17 MVA 17a MCA Bike/Pedestrian 18 Multiple trauma 19 Fall 20 Assault 21 Animal Bite 22 Major Burn/Smoke Inhalation 23 Recheck/Suture Removal 24 General	26 Headache 27 Ear Complaints 28 Nose 29 Throat or Dental Pain 30 Cough 31 Wheezing/Asthma 32 Dyspnea 33 Chest Pain 34 Palpitations 35 Upper Extremity Pain 36 Abdominal Pain 37 Vomiting/Diarrhea 38 GI bleeding/Rectal Pain 39 Female GU 40 OB Problems 41 Male GU 42 Lower Extremity Pain 43 Skin Rash/Abscess 44 Allergy 45 Changed Mental Status 46 Focal Neuro Deficit 47 Dizzy 48 Syncope 49 Seizure 50 CPR 51 Critical Care 52 Overdose 53 Psych

Ok Cancel

FIG. 9A

<div style="border: 1px solid black; padding: 2px;">T-Chart</div> <div style="border: 1px solid black; padding: 2px;">Jack</div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; border: 1px solid black; margin-right: 5px;"></div> <div>Home</div> </div> </div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; border: 1px solid black; margin-right: 5px;"></div> <div>Annotations</div> </div> </div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; border: 1px solid black; margin-right: 5px;"></div> <div>Notes</div> </div> </div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; border: 1px solid black; margin-right: 5px;"></div> <div>Clinical</div> </div> </div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; border: 1px solid black; margin-right: 5px;"></div> <div>History</div> </div> </div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; border: 1px solid black; margin-right: 5px;"></div> <div>Exam</div> </div> </div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; border: 1px solid black; margin-right: 5px;"></div> <div>Course</div> </div> </div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; border: 1px solid black; margin-right: 5px;"></div> <div>Dx/DI</div> </div> </div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; border: 1px solid black; margin-right: 5px;"></div> <div>Viewing</div> </div> </div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; border: 1px solid black; margin-right: 5px;"></div> <div>Report</div> </div> </div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; border: 1px solid black; margin-right: 5px;"></div> <div>Discharge</div> </div> </div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; border: 1px solid black; margin-right: 5px;"></div> <div>Prescription</div> </div> </div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; border: 1px solid black; margin-right: 5px;"></div> <div>Excuse</div> </div> </div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; border: 1px solid black; margin-right: 5px;"></div> <div>Printing</div> </div> </div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; border: 1px solid black; margin-right: 5px;"></div> <div>Clinical</div> </div> </div> <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; align-items: center;"> <div style="width: 20px; height: 20px; border: 1px solid black; margin-right: 5px;"></div> <div>Discharge</div> </div> </div>	<div style="border: 1px solid black; padding: 5px;"> <div style="display: flex; justify-content: space-between;"> <div>Abdominal Pain</div> <div>time: _____ room: _____</div> </div> <div style="margin-top: 5px;"> arrived: pvt vehicle EMS context: _____ historian: patient EMS family limited by: _____ <div style="border: 1px solid black; padding: 2px; margin-top: 2px;">OHPI</div> </div> <div style="margin-top: 5px;"> chief complaint: abdominal pain _____ flank pain _____ started: just PTA today last night yesterday _____ </div> <div style="margin-top: 10px;"> still present _____ gone _____ timing: _____ <div style="display: flex; justify-content: space-between;"> <div> quality _____ "pain" _____ sharp _____ stabbing _____ cramping _____ burning _____ dull _____ migrating _____ ... _____ </div> <div> location: R chest - central- L chest <div style="display: flex; justify-content: space-around; margin-top: 5px;"> <div> RUQ upper LUQ epig generalized L flank </div> <div> R flank L flank </div> </div> </div> </div> </div> </div>	<div style="border: 1px solid black; padding: 5px;"> <div style="display: flex; justify-content: space-between;"> <div>OROS</div> <div>CONSTITUTIONAL</div> </div> <div style="margin-top: 5px;"> GI vomiting blood _____ black stools _____ bloody stools _____ URINARY difficulty w/urination _____ pain w/urination _____ frequency _____ Female _____ pregnant _____ LNMP _____ missed periods irreg _____ abdominal bleeding _____ all systems neg. except as marked _____ </div> </div> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;"> <div style="display: flex; justify-content: space-between;"> <div>OPAST Hx</div> <div></div> </div> <div style="margin-top: 5px;"> negative _____ see nurses notes _____ peptic ulcer _____ gall stones _____ bowel obstruction _____ kidney stones _____ heart diz _____ lung diz _____ renal dz _____ HTN _____ hyperlipidemia _____ previous surgery _____ abdominal surgery _____ </div> </div>
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FIG. 9B

<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> Closure <input type="checkbox"/> <input checked="" type="checkbox"/> </div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> similar symptoms previously: once twice sev. times many times - occasionally frequently </div> <div style="display: flex; justify-content: space-between;"> milder as bad worse varying </div> </div>	
<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> recently seen ED office clinic hospitalized </div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> 0 MEDS _none _see nurses notes </div> </div>	
<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> 0 ALLERGIES _NKDA _see nurses notes </div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> 0 SOCIAL Hx smoker ETOH drugs </div> </div>	
<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> residence/travel: </div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> 0 FAMILY Hx gall bladder heart dz hx of: </div> </div>	

FIG. 10

<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> Abdominal Pain time: room: </div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> GI CONSTITUTIONAL </div> </div>	
<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> arrived: pvt vehicle EMS context: </div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> _vomiting blood _fever _chills </div> </div>	
<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> historian: patient EMS family limited by: </div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> _black stools Neuro & EENT </div> </div>	
<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> OHPI </div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> _bloody stools _headache </div> </div>	
<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> chief complaint: abdominal pain flank pain </div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> _sore throat _blurred vision </div> </div>	
<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> started: just PTA today last night yesterday </div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> _difficulty w/urination CVS & Pulmonary </div> </div>	
<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> still present gone timing: </div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> _pain w/urination _chest pain </div> </div>	
<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> quality "pain" location: R chest -central-L chest </div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> Female _pregnant </div> </div>	
<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> sharp epig </div> </div>		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> LNMP _cough </div> </div>	

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FIG. 11

T-Chart		Abdominal Pain		time: _____	room: _____
Jack		arrived: pvt vehicle EMS		context: _____	
Home		historian: patient EMS family		limited by: _____	
Annotations		OHPI			
L S		chief complaint: (abdominal pain)		flank pain	
Notes		started: just PTA today		last night yesterday	
Clinical		still present _____		gone _____	timing: _____
History		location: R chest - central- L chest			
Exam		epig RUQ upper LUQ			
Course		generalized			
Dx/DI		R flank			L flank
Viewing		RLQ LLQ			
Report		R pelvis pelvis L pelvis			
Discharge		suprapub			L back
Prescription		radiating to: _____		additional pain	
Excuse		associated symptoms:			
Printing		nausea _____		vomiting _____	
Clinical		loss of appetite _____		diarrhea _____	
Discharge		severity of pain: _____			
		modifying factors: _____			

OROS	
GI	CONSTITUTIONAL
_____vomiting blood _____	_____fever _____chills _____
_____black stools _____	_____Neuro & EENT _____
_____bloody stools _____	_____headache _____
URINARY	_____sore throat _____
_____difficulty w/urination _____	_____blurred vision _____
_____pain w/urination _____	CVS & Pulmonary
_____frequency _____	_____chest pain _____
Female _____pregnant _____	_____difficulty breathing _____
LNMP	_____cough _____
_____missed periods _____irreg _____	MS & Skin
_____abdominal bleeding _____	_____joint pain _____back pain _____
_____all systems neg. except as marked _____	_____skin rash _____
OPAST Hx	
_____negative _____see nurses notes _____	_____heart diz _____neuro diz _____
_____peptic ulcer _____	_____lung diz _____GI diz _____
_____gall stones _____	_____renal dz _____other dz _____
_____bowel obstruction _____	HTN _____diabetes _____
_____kidney stones _____	_____hyperlipidemia _____
	_____previous surgery _____
	_____abdominal surgery _____

FIG. 12

T-Chart	Abdominal Pain time: _____ room: _____	
Jack	arrived: pvt vehicle EMS _____ context: _____	
Home	historian: patient EMS family _____ limited by: _____	
Annotations	<div style="border: 1px solid black; padding: 2px;">OHPI</div>	
Notes	chief complaint: <u>abdominal pain</u> _____ flank pain _____ started: just PTA today last night yesterday _____	
Clinical	still present _____ gone _____ timing: _____	
History	location: R chest - central - L chest epig RUQ upper LUQ generalized L flank R flank R back R pelvis suprapub L flank L back	
Exam	quality "pain" _____ sharp _____ stabbing _____ cramping _____ burning _____ dull _____ migrating _____ ... _____ well localized _____ diffuse _____	
Course	radiating to: _____ additional pain _____ associated symptoms: _____	
Dx/DI	nausea _____ vomiting _____ loss of appetite _____ diarrhea _____ severity of pain: _____ modifying factors: _____	
Viewing		
Report		
Discharge		
Prescription		
Excuse		
Printing		
Clinical		
Discharge		

OROS		
GI	vomiting blood _____ black stools _____ bloody stools _____ URINARY difficulty w/urination _____ pain w/urination _____ frequency _____ Female pregnant _____ LNMP missed periods irreg _____ abdominal bleeding _____ all systems neg. except as marked _____	
CONSTITUTIONAL	fever chills _____ Neuro & EENT _____ headache _____ sore throat _____ blurred vision _____ CVS & Pulmonary _____ chest pain _____ difficulty breathing _____ cough _____ MS & Skin _____ joint pain back pain _____ skin rash _____	
OPAST Hx	negative see nurses notes _____ peptic ulcer _____ gall stones _____ bowel obstruction _____ kidney stones _____ heart diz _____ lung diz _____ renal dz _____ HTN _____ hyperlipidemia _____ previous surgery _____ abdominal surgery _____	

T-Chart	Abdominal Pain	time:	room:
Jack	arrived: pvt vehicle EMS	context:	
	historian: patient EMS family	limited by:	
	OHPH		
Annotations	chief complaint: abdominal pain	flank pain	
L S	started: just PTA today last night yesterday		
Notes	still present	gone	timing:
Clinical	quality "pain"	location:	R chest -central- L chest
History	sharp		epig RUQ upper LUQ
Exam	stabbing		generalized L flank
Course	cramping		
	burning		
	dull		
	migrating		
	well localized		
	diffuse		
	radiating to:		additional pain
	associated symptoms:		
	nausea		vomiting
	loss of appetite		diarrhea
	severity of pain:		
	modifying factors:		

GI
_vomiting blood
_black stools
_bloody stools
URINARY
_difficulty w/urination
_pain w/urination
_frequency
Female _pregnant
LNMP
_missed periods irreg
_abdominal bleeding
_all systems neg. except as marked

OPAST Hx
_negative see nurses notes
_peptic ulcer
_gall stones
_bowel obstruction
_kidney stones
_heart diz
_lung diz
_renal dz
HTN
hyperlipidemia
previous surgery
abdominal surgery

CONSTITUTIONAL
_fever chills
Neuro & EENT
_headache
_sore throat
_blurred vision
CVS & Pulmonary
_chest pain
_difficulty breathing
_cough
MS & Skin
_joint pain back pain
_skin rash

FIG. 14

T-Chart	Abdominal Pain time: _____ room: _____	
Jack	arrived: pvt vehicle EMS _____ context: _____	
<input checked="" type="checkbox"/> Home	historian: patient EMS family _____ limited by: _____	
Annotations	OHPI	
<input checked="" type="checkbox"/> S	chief complaint: <u>Abdominal pain</u> _____ flank pain _____	
<input checked="" type="checkbox"/> Notes	started: just PTA today last night yesterday _____	
Clinical	still present _____ gone _____ timing: _____	
History	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>quality: _____</p> <p>"pain": _____</p> <p>sharp _____</p> <p>stabbing _____</p> <p>cramping _____</p> <p>burning _____</p> <p>dull _____</p> <p>migrating _____</p> <p>... _____</p> <p>well localized _____</p> <p>diffuse _____</p> </div> <div style="width: 50%;"> <p>location: _____</p> <p>R chest - central - L chest</p> <p>epig _____</p> <p>RUQ upper LUQ _____</p> <p>generalized _____</p> <p>R flank _____</p> <p>L flank _____</p> <p>RLQ _____</p> <p>LLQ _____</p> <p>R pelvis pelvis L pelvis _____</p> <p>suprapub _____</p> <p>R back _____</p> <p>L back _____</p> </div> </div>	
Exam	radiating to: _____ additional pain _____	
Course	associated symptoms: _____	
Dx/DI	nausea _____ vomiting _____	
Viewing	loss of appetite _____ diarrhea _____	
Report	severity of pain: _____	
Discharge	modifying factors: _____	
Prescription		
Excuse		
Printing		
Clinical		
Discharge		

OROS		
GI	<u>vomiting blood</u> _____ <u>black stools</u> _____ <u>bloody stools</u> _____ URINARY <u>difficulty w/urination</u> _____ <u>pain w/urination</u> _____ <u>frequency</u> _____ <u>Female</u> _____ <u>pregnant</u> _____ LNMP <u>missed periods</u> _____ <u>irreg</u> _____ <u>abdominal bleeding</u> _____ <u>all systems neg. except as marked</u> _____	
	CONSTITUTIONAL <u>fever</u> _____ <u>chills</u> _____ <u>Neuro & EENT</u> <u>headache</u> _____ <u>sore throat</u> _____ <u>blurred vision</u> _____ <u>CVS & Pulmonary</u> <u>chest pain</u> _____ <u>difficulty breathing</u> _____ <u>cough</u> _____ <u>MS & Skin</u> <u>joint pain</u> _____ <u>back pain</u> _____ <u>skin rash</u> _____	
OPAST Hx	<u>negative</u> _____ <u>see nurses notes</u> _____ <u>peptic ulcer</u> _____ <u>gall stones</u> _____ <u>bowel obstruction</u> _____ <u>kidney stones</u> _____ <u>heart diz</u> _____ <u>neuro diz</u> _____ <u>lung diz</u> _____ <u>GI diz</u> _____ <u>renal dz</u> _____ <u>other dz</u> _____ <u>HTN</u> _____ <u>diabetes</u> _____ <u>hyperlipidemia</u> _____ <u>previous surgery</u> _____ <u>abdominal surgery</u> _____	

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FIG. 15

T-Chart		Abdominal Pain		time: _____	room: _____
Jack		arrived: pvt vehicle EMS		context: _____	
OH Home		historian: patient EMS family		limited by: _____	
Annotations		chief complaint: (abdominal pain)		flank pain	
L S		started: just PTA today last night yesterday			
Notes		still present _____		gone _____	timing: _____
Clinical		quality "pain"		location: R chest - central - L chest	
History		sharp		epig RUQ upper LUQ	
Exam		stabbing		generalized	
Course		cramping		R flank	
Dx/DI		burning		L flank	
Viewing		dull		RUQ LLQ	
Report		migrating		R pelvis pelvis L pelvis	
Discharge		... well localized		suprapub	
Prescription		diffuse		R back	
Excuse		radiating to: _____		additional pain _____	
Printing		associated symptoms:		nausea _____ vomiting _____	
Clinical		loss of appetite _____		diarrhea _____	
Discharge		severity of pain: _____		modifying factors: _____	

GI		vomiting blood _____		CONSTITUTIONAL	
		black stools _____		fever _____ chills _____	
		bloody stools _____		Neuro & EENT	
URINARY		difficulty w/urination _____		headache _____	
		pain w/urination _____		sore throat _____	
		frequency _____		blurred vision _____	
Female		pregnant _____		CVS & Pulmonary	
LNMP		missed periods _____ irreg _____		chest pain _____	
		abdominal bleeding _____		difficulty breathing _____	
		all systems neg. except as marked		cough _____	
				MS & Skin	
				joint pain _____ back pain _____	
				skin rash _____	

OPAST Hx		negative _____ see nurses notes _____		heart diz _____ neuro diz _____	
		peptic ulcer _____		lung diz _____ GI diz _____	
		gall stones _____		renal dz _____ other dz _____	
		bowel obstruction _____		HTN _____ diabetes _____	
		kidney stones _____		hyperlipidemia _____	
				previous surgery _____	
				abdominal surgery _____	

FIG. 16

T-Chart															
Jack															
Home															
Annotations															
L S															
Notes															
Clinical															
History															
Exam															
Course															
DxDI															
Viewing															
Report															
Discharge															
Prescription															
Excuse															
Printing															
Clinical															
Discharge															
Closure															
Lock															

Clinical Report

Hospital Name-
Emergency Department
Street Address - 214-555-1212
12-Apr-2001

Patient Name: Jack

HISTORY OF PRESENT ILLNESS
Chief complaint- ABDOMINAL PAIN. He has had nausea and loss of appetite. No vomiting or diarrhea.

Physician Signature

FIG. 17

T-Chart	Abdominal Pain time: _____ room: _____	
Jack	arrived: pvt vehicle EMS	context: _____
OH Home	historian: patient EMS family	limited by: _____
Annotations	OHPI	
Notes	chief complaint: <u>abdominal pain</u> _____ flank pain _____	
Clinical	started: just PTA today last night yesterday _____	
History	still present _____ gone _____ timing: _____	
Exam	<div style="display: flex; justify-content: space-between;"> <div> location: R chest -central- L chest epig RUQ upper LUQ generalized R flank L flank </div> <div> R back L back </div> </div>	
Course	quality: "pain" sharp stabbing cramping burning dull migrating ... well localized diffuse	
Dx/DI	radiating to: _____ additional pain _____	
Viewing	associated symptoms: _____	
Report	nausea _____ vomiting _____	
Discharge	loss of appetite _____ diarrhea _____	
Prescription	severity of pain: _____	
Excuse	modifying factors: _____	
Printing		
Clinical		
Discharge		

OROS	GI _vomiting blood _____ _black stools _____ _bloody stools _____ URINARY _difficulty w/urination _____ _pain w/urination _____ _frequency _____ Female _____ pregnant _____ LNMP _____ _missed periods _____ irreg _____ _abdominal bleeding _____ _all systems neg. except as marked _____	CONSTITUTIONAL _fever _____chills _____ Neuro & EENT _headache _____ _sore throat _____ _blurred vision _____ CVS & Pulmonary _chest pain _____ _difficulty breathing _____ _cough _____ MS & Skin _joint pain _____back pain _____ _skin rash _____
OPAST Hx	_negative _____see nurses notes _____ _peptic ulcer _____ _gall stones _____ _bowel obstruction _____ _kidney stones _____ _heart diz _____neuro diz _____ _lung diz _____GI diz _____ _renal dz _____other dz _____ _HTN _____diabetes _____ _hyperlipidemia _____ _previous surgery _____ _abdominal surgery _____	

FIG. 18

T-Chart	Abdominal Pain time: _____ room: _____		
Jack	arrived: pvt vehicle EMS	EMS context:	
Home	historian: patient EMS family	limited by:	
Annotations	OHPI		
Ⓛ	chief complaint: (abdominal pain) flank pain		
Notes	started: just PTA today last night yesterday		
Clinical	still present _____ gone _____ timing: _____		
History	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>location: R chest - central - L chest</p> <p>epig</p> <p>RUQ upper LUQ</p> <p>generalized</p> <p>R flank</p> <p>L flank</p> </div> <div style="width: 45%;"> <p>LLQ</p> <p>RLQ</p> <p>R pelvis pelvis L pelvis</p> <p>suprapub</p> <p>L back</p> </div> </div>		
Exam	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>sharp</p> <p>stabbing</p> <p>cramping</p> <p>burning</p> <p>dull</p> <p>migrating</p> <p>...</p> <p>well localized</p> <p>diffuse</p> </div> <div style="width: 45%;"> <p>R back</p> <p>additional pain</p> </div> </div>		
Course	radiating to: _____ associated symptoms: _____		
Dx/DI	nausea _____ vomiting _____		
Viewing	loss of appetite _____ diarrhea _____		
Report	severity of pain: _____ modifying factors: _____		
Discharge			
Prescription			
Excuse			
Printing			
Clinical			
Discharge			

FIG. 19

T-Chart Jack <input checked="" type="checkbox"/> Home Annotations <input checked="" type="checkbox"/> <input checked="" type="checkbox"/> Notes Clinical <input checked="" type="checkbox"/> History <input checked="" type="checkbox"/> Exam <input checked="" type="checkbox"/> Course <input checked="" type="checkbox"/> Dx/Di Viewing Report Discharge Prescription Excuse Printing <input checked="" type="checkbox"/> Clinical <input checked="" type="checkbox"/> Discharge	Abdominal Pain time: _____ room: _____ arrived: pvt vehicle EMS _____ context: _____ historian: patient EMS family _____ limited by: _____ OHPI chief complaint: <u>abdominal pain</u> _____ flank pain _____ started: just PTA today last night yesterday _____ still present _____ gone _____ timing: _____ quality "pain" _____ location: R chest - central - L chest sharp _____ epig _____ RUQ upper LUQ _____ L flank stabbing _____ generalized _____ cramping _____ LLQ _____ burning _____ RLQ _____ LLQ _____ dull _____ R pelvis pelvis L pelvis _____ migrating _____ suprapub _____ L back ... _____ R back _____ well localized _____ diffuse _____ radiating to: _____ additional pain _____ associated symptoms: nausea _____ vomiting _____ loss of appetite _____ diarrhea _____ severity of pain: _____ modifying factors: _____	OROS GI vomiting blood _____ black stools _____ bloody stools _____ URINARY difficulty w/urination _____ pain w/urination _____ frequency _____ Female _____ pregnant _____ LNMP _____ missed periods _____ abdominal bleed _____ all systems neg. e _____ OPAST Hx negative see nur _____ peptic ulcer _____ gall stones _____ bowel obstruction _____ kidney stones _____	<input checked="" type="checkbox"/>	CONSTITUTIONAL fever _____ chills _____ Neuro & EENT _____ headache _____ sore throat _____ blurred vision _____ CVS & Pulmonary _____ chest pain _____ difficulty breathing _____ cough _____ minutes _____ hours _____ days _____ weeks _____ months _____ years _____ ago _____ times _____ 1 2 3 4 5 - _____ for 6 7 8 9 0 1/2 _____ several _____ many _____ occasionally _____ today since yesterday recently chronically -gone now -still present -improving -worsening COUGH mild moderate severe dry / productive scant moderate copious thick thin clear yellow green brown white blood tinged frank blood cough changed from baseline smoker sputum changed from baseline ... similar to previous symptoms
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FIG. 20

T-Chart	Jack	Home	Annotations	Notes	Clinical	History	Exam	Course	Diagnosis	Viewing	Report	Discharge	Prescription	Excuse	Printing	Clinical	Discharge	Closure	
---------	------	------	-------------	-------	----------	---------	------	--------	-----------	---------	--------	-----------	--------------	--------	----------	----------	-----------	---------	--

Clinical Report

Hospital Name-
Emergency Department
Street Address - 214-555-1212
12-Apr-2001

Patient Name: Jack

HISTORY OF PRESENT ILLNESS

Chief complaint- ABDOMINAL PAIN. He has had nausea and loss of appetite. No vomiting or diarrhea.

REVIEW OF SYSTEMS

The patient has had a sever cough productive of thick, green, blood tinged sputum. No frankly bloody sputum.

Physician Signature

FIG. 21

T-Chart	Abdominal Pain time: _____ room: _____	
Jack	arrived: pvt vehicle EMS _____ context: _____	
OHPI	historian: patient EMS family _____ limited by: _____	
Annotations	OHPI chief complaint: (abdominal pain) _____ flank pain _____ started: just PTA today last night yesterday _____	
Notes	still present _____ gone _____ timing: _____ quality "pain" _____ location: R chest, central-L chest sharp RUQ upper LUQ epig stabbing generalized L flank cramping R flank burning RUQ LLQ dull R pelvis pelvis L pelvis migrating suprapub ... R back L back well localized diffuse	
Clinical	radiating to: _____ additional pain _____	
History	associated symptoms: _____	
Exam	nausea _____ vomiting _____	
Course	loss of appetite _____ diarrhea _____	
DrDI	severity of pain: _____	
Viewing	modifying factors: _____	
Report		
Discharge		
Prescription		
Excuse		
Printing		
Clinical		
Discharge		

OROS	GI vomiting blood _____ black stools _____ bloody stools _____ URINARY difficulty w/urination _____ pain w/urination _____ frequency _____ Female _____ pregnant _____ LNMP _____ missed periods _____ abdominal bleed _____ all systems neg. e _____	
	CONSTITUTIONAL fever _____ chills _____ Neuro & EENT headache _____ sore throat _____ blurred vision _____ CVS & Pulmonary chest pain _____ difficulty breathing _____ (cough) _____	
	<input checked="" type="checkbox"/> <div style="display: flex; justify-content: space-between;"> <div> 1 2 3 4 5 - for 6 7 8 9 0 1/2 several many occasionally today since yesterday recently chronically -gone now -still present -improving -worsening </div> <div> minutes hours days weeks months years ago times </div> </div>	
	OPAST Hx negative _____ see nur _____ peptic ulcer _____ gall stones _____ bowel obstruction _____ kidney stones _____	
	COUGH mild moderate (severe) dry / (productive) scant moderate copious (thick) thin clear yellow (green) brown white (blood tinged) frank blood cough changed from baseline smoker sputum changed from baseline ... similar to previous symptoms	

FIG. 22

T-Chart	Abdominal Pain time: _____ room: _____	
Jack	arrived: pvt vehicle EMS _____ context: _____	
<input checked="" type="checkbox"/> Home	historian: patient EMS family _____ limited by: _____	
Annotations	<div style="border: 1px solid black; padding: 2px;">OHPI</div>	
<input checked="" type="checkbox"/> S	chief complaint: <u>abdominal pain</u> _____ flank pain _____ started: just PTA today last night yesterday _____	
<input checked="" type="checkbox"/> Notes	still present _____ gone _____ timing: _____	
<input checked="" type="checkbox"/> Clinical	location: <div style="display: flex; justify-content: space-around;"> <div style="text-align: center;"> R chest - central - L chest epig RUQ upper LUQ generalized R flank L flank </div> <div style="text-align: center;"> RUQ LUQ L pelvis suprapub L back </div> </div>	
<input checked="" type="checkbox"/> History	quality: "pain" _____ sharp _____ stabbing _____ cramping _____ burning _____ dull _____ migrating _____ ... well localized _____ diffuse _____	
<input checked="" type="checkbox"/> Exam	radiating to: _____ additional pain _____	
<input checked="" type="checkbox"/> Course	associated symptoms: _____	
<input checked="" type="checkbox"/> Dx/DI	nausea _____ vomiting _____ loss of appetite _____ diarrhea _____	
Viewing	severity of pain: _____ modifying factors: _____	
Report		
Discharge		
Prescription		
Excuse		
Printing		
Clinical		
Discharge		

OROS		
GI	vomiting blood _____ black stools _____ bloody stools _____ difficulty w/urination _____ pain w/urination _____ frequency _____ Female _____ pregnant _____ LNMP _____ missed periods _____ irreg _____ abdominal bleeding _____ all systems neg. except as marked _____	
URINARY	chest pain _____ difficulty breathing _____ cough _____ severe, productive, thick, gr _____ MS & Skin _____ joint pain _____ back pain _____ skin rash _____	
CONSTITUTIONAL	fever _____ chills _____ Neuro & EENT _____ headache _____ sore throat _____ blurred vision _____ CVS & Pulmonary _____ chest pain _____ difficulty breathing _____ cough _____ severe, productive, thick, gr _____ MS & Skin _____ joint pain _____ back pain _____ skin rash _____	
OPAST Hx	negative _____ see nurses notes _____ peptic ulcer _____ gall stones _____ bowel obstruction _____ kidney stones _____ heart diz _____ neuro diz _____ lung diz _____ GI diz _____ renal dz _____ other dz _____ HTN _____ diabetes _____ hyperlipidemia _____ previous surgery _____ abdominal surgery _____	

FIG. 23

T-Chart	MVA	time: _____	room: _____
Jim	arrived: pvt vehicle EMS _____	context: _____	
99 Home	historian: patient EMS family _____	limited by: _____	
Annotations	OHPI		
L S	chief complaint: MVA _____		
Notes	location of injuries: _____		
Clinical	occurred: just PTA today last night yesterday _____		
99 History	pain: none _____ mild _____ moderate _____ severe _____		
Q Exam	assoc: blow head _____ neck pain _____ LOC _____ dazed _____ seizure _____		
Q Course	mechanism details: 0 _____		
Q DrDI	OROS		
Viewing	numbness weakness _____ trouble breathing _____		
Report	hearing loss _____ nausea vomiting _____		
Discharge	loss of vision _____ bladder dysfunction _____		
Prescription	headache _____ skin laceration _____		
Excuse	chest pain _____ fever recently ill _____		
Printing	depressed _____ all systems neg. except as marked _____		
Clinical	OPAST HISTORY		
Discharge	neg see nurses notes _____ heart dz _____ neuro dz _____		
	tetanus: UTD >5 >10 unk _____ lung dz _____ GI dz _____		
	renal dz _____ other dz _____		
	HTN _____ diabetes _____		
	previous surgery _____		
	0 MEDS none see nurses notes _____		
	0 ALLERGIES NKDA see nurses notes _____		
Closure	0 SOCIAL HX smoker _____ ETOH _____ drugs _____		
Q Q	residence/travel: _____ 0 _____		

bkbrd c-collar _____	nurses notes rev'd _____	VS rev'd _____
PHYSICAL EXAM		
HEAD	_alert _____ _NAD _____ _anxious / lethargic / obtunded _____ _in distress mild mod severe _____ Battle's sign _____ raccoon eyes _____ non-tender _____ no swelling _____	
Add'l Injury 0		
NECK	_verteb. tenderness _____ painful movement _____ _non-tender _____ _decrsd ROM _____ muscle spasm _____ _painless ROM _____ _pupillary exam: _____ _ocular injury _____ _abnml fundoscopic _____ _ROM intact _____ _hematympanum _____ _malocclusion _____ _no dental injury _____ _pharynx nml _____	

FIG. 24

T-Chart Jim Home Annotations Notes Clinical History Exam Course DxDI Viewing Report Discharge Prescription Excuse Printing Clinical Discharge Closure Lock		RESPIRATORY _resp distress _____ _chest wall injury #1 _____ #2 _____ _decreased breath sounds _____ _rales _____ rhonchi _____ _wheezes _____ crepitus _____ _abnml rate techycardia bradycardia _____ _abnml rhythm _____ _JVD present _____ _extra sounds _____ murmur _____ _pulse exam _____ _obese _____ scar _____ other _____ _tenderness #1 _____ #2 _____ _guarding _____ _rebound _____ _organomegaly _____ gravid uterus _____ _abnml bowel sounds _____ _distention _____ _mass _____ _panneal hematoma _____ _blood at urethral meatus _____ _blood in stool _____ _abnormal digital rectal _____ _tenderness _____ #2 _____ _vertebral point tenderness _____ _muscle spasm _____ limited ROM _____		NEURO _oriented x3 _____ _no motor deficit _____ _no sensory deficit _____ _reflexes nml _____ SKIN _intact _____ _warm, dry _____ _nml color _____ EXTREMITIES _atraumatic _____ _nml inspection _____ _pelvis stable _____ _no pedal edema _____		_altered mental status _____ GCS _____ _CN deficit _____ _weakness _____ sensory deficit _____ _reflex exam: _____ _cyanosis _____ pallor _____ _cool skin _____ diaphoresis _____ _skin rash _____ poor skin turgor _____ _soft tissue tenderness _____ _bony tenderness _____ _abrasions #1 _____ #2 _____ _limping gait _____ cannot bear weight _____ _gait not tested due to pain _____	
		RT shoulder clavicle chest arm elbow forearm wrist hand hip GU thigh knee leg ankle foot		LT shoulder clavicle chest arm elbow forearm wrist hand hip GU thigh knee leg ankle foot			

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FIG. 25

[illegible]

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FIG. 26

CLINICAL IMPRESSION		PRESCRIPTIONS	
acute pain _____ MVA MCA bike pedestrian _____ skin fracture laceration _____ skull _____ rib _____ abrasion(s) _____ facial _____ pelvic _____ skin avulsion _____ spine _____ hip _____ foreign body, soft tissue _____ upper ext _____ lower ext _____ soft tissue _____ wrist _____ ankle _____ cervical strain _____ hand _____ foot _____ neck pain _____ other / major injury _____ back pain _____ concussion _____ strain _____ head injury _____ sprain _____ spinal injury _____ contusion _____ hemorrhage _____ _____ hypotension _____ _____ shock _____ _____ respiratory failure _____ _____ chest injury _____ _____ cardiac arrest _____ _____ abdominal injury _____ _____ renal injury _____ _____ dental trauma _____	OTC meds _____ antibiotics _____ Acetaminophen _____ Augmentin _____ Motrin _____ Cephalixin _____ pain / nausea _____ Cipro 10d _____ Darvocet-N _____ muscle _____ Lorab _____ Erythromycin _____ Phenergan _____ Robaxin _____ Tylenol w/Cod. _____ Skelaxin _____ _____ Soma _____	NSAID's _____ Ibuprofen _____ Lodine _____ Naproxen _____ Flexeril _____ Robaxin _____ Skelaxin _____ Soma _____	more prescriptions _____ 0 Allergy/Decong _____ 0 Eye _____ 0 Nsaids _____ 0 Sedative _____ 0 Analgesics _____ 0 ENT _____ 0 M.Relax _____ 0 Skin _____ 0 Antibiotics _____ 0 GI _____ 0 Ob-Gyn _____ 0 Steroids _____ 0 Cardiac _____ 0 Neuro _____ 0 Pulmonary _____ 0 Urology _____
DISCHARGE INSTRUCTIONS			
treatment _____ 0 activity / work-school _____ c-collar _____ no restrictions _____ ice _____ no strenuous activity _____ wound care _____ elevate _____ sling _____ splint _____ rib belt _____ crutches _____ knee immobilizer _____ elastic wrap _____ diet _____ no restrictions _____ clear liquids only _____ follow-up _____		0 w/ Dr. _____ w/ your doctor _____ 0 w/ Dr. (#2) _____ w/ specialist _____ return to ED _____ discharged home in _____	

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T-Chart	Abdominal Pain	time: _____	room: _____
Mary	arrived: pvt vehicle EMS	context: _____	
OH Home	historian: patient EMS family	limited	
Annotations	OHPI		
Chief complaint:	abdominal pain _____ flank pa		
started:	just PTA today last night yesterday		
still present	gone	timing:	
quality	location:	R chest	central- L chest
"pain"		epig	
sharp		RUQ upper LUQ	
stabbing		generalized	
cramping			
burning			
dull			
migrating			
...			
well localized			
diffuse			
radiating to:		additional pain	
associated symptoms:			
nausea		vomiting	
loss of appetite		diarrhea	
severity of pain:			
modifying factors:			

OTHER HISTORY

CVS-PESP

chest pain _____

palps _____

dyspnea _____

cough _____

foot swing _____

calf pain _____

GI

nausea _____

vomiting _____

MUSCULOSKEL

neck pain _____

back pain _____

joint pain _____

SKIN

skin rash _____

skin lesion _____

insect bite _____

skin lac _____

NEURO/PSYCH

minutes (<<)

hours

days ago

weeks times

months

years

1 2 3 4 5 -

for 6 7 8 9 0 1/2

several

many

occasionally

today since yesterday recently chronically

gone now -still present -improving -worsening

VOMITING

... mild moderate severe

once twice several times numerous

blood-tinged w/frank blood

dark coffee-ground

billous faculent

... similar to previous symptoms

FIG. 28A

EVI	nurses notes rev'd	VS rev'd	O 2/other
Mary	PHYSICAL EXAM		
Home	_alert _NAD _anxious / lethargic / obtunded _in distress mild mod severe		
Annotations	_conjunctival findings _scleral icterus _pale conjunctivae		
Notes	_abnl ear exam _runny nose _pharyngeal erythema _tonsillar exudate _dry mucous membranes		
Clinical	ENT _ears nml _nose nml _pharynx nml		
History	NECK _nml inspection _supple		
Exam	CVS _nml rate/rhythm _heart sounds nml		
Course	RESPIRATORY _no resp distress _breath sounds nml _chest nontender		
Dx/DI	_abnl rate tachycardia bradycardia _abnl rhythm _murmur _extra sounds _decrsd pulses		
Viewing	_resp distress _accessory muscles _decreased air movement _rales		
Report	_abnl rate tachycardia bradycardia _abnl rhythm _murmur _extra sounds _decrsd pulses		
Discharge	_resp distress _accessory muscles _decreased air movement _rales		
Prescription	_abnl rate tachycardia bradycardia _abnl rhythm _murmur _extra sounds _decrsd pulses		
Excuse	_resp distress _accessory muscles _decreased air movement _rales		
Printing	_abnl rate tachycardia bradycardia _abnl rhythm _murmur _extra sounds _decrsd pulses		
Clinical	_resp distress _accessory muscles _decreased air movement _rales		
Discharge	_abnl rate tachycardia bradycardia _abnl rhythm _murmur _extra sounds _decrsd pulses		

ABDOMEN	OBSE	scar	other
_soft	_tenderness #1	_#2	
_nontender	_guarding		
_no organomegaly	_rebound		
	_organomegaly	_gravid uterus	
	_abnl bowel sounds		
	_distention		
	_mass		
0 FEM GENITALIA	_vag. bleeding	_discharge	
_external exam nml	_bimanual tenderness		
_bimanual exam nml	_enlarged uterus	_mass	
_speculum exam nml			
MALE GENITALIA	_tenderness		
_nml genitalia	_scrotal swelling		
_testes descended			
RECTAL	_blood in stool		
_nml rectal exam	_tenderness		
_nontender	_abnormal digital rectal		
_hemo neg stool			
BACK	_CVA tenderness		
_nml inspection			
EXTREMITIES	_pedal edema		
_nml ROM	_calf tenderness		
_no pedal edema			
SKIN	_cyanosis	_pallor	
_nml color	_cool skin	_diaphoresis	

B

FIG. 28B

<div>Closure</div> <div> <input type="checkbox"/> <input checked="" type="checkbox"/> </div>	_rhonchi _____ _wheezes _____ _prolonged expirations _____	_warm, dry _____ _no rash _____	_skin rash _____ _poor skin turgor _____
	0 NEURO _oriented x _____ _no motor deficit _____ _no sensory deficit _____ _reflexes nml _____	altered mental status _____ _CN deficit _____ _weakness _____ _sensory deficit _____ _reflex exam: _____	

FIG. 29

<p align="center">Clinical Report</p> <p align="center">Hospital Name - Emergency Department</p> <p align="center">Street Address - 214-555-1212</p> <p align="center">12-Apr-2001</p> <p align="center">Patient Name: Mary</p> <p>PHYSICAL EXAM</p> <p>Eyes: Scleral icterus. Pale conjunctivae.</p> <p>ENT: Ears normal. Nasal discharge present. Dry mucous membranes present.</p> <p>Neck: Meningeal signs present. Lymphadenopathy present. Thyromegaly.</p> <p>Abdomen: Obese. Rebound tenderness. Guarding present.</p> <p>Skin: Cyanosis. Skin rash.</p> <p>Neuro: Oriented X 3. No motor deficit. No sensory deficit.</p> <p align="right">_____ Physician Signature</p>

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FIG. 30

EV1	nurses notes rev'd		VS rev'd	0 2/other	ABDOMEN	scar	other
Jane	PHYSICAL EXAM				soft	tenderness #1	#2
Home	_alert		gyn				
Annotations	_NAD						
Notes	EYES						
Clinical	_nml inspection						
History	_PERRL						
Exam	ENT						
Course	_ears nml						
Dx/DI	_nose nml						
Viewing	_pharynx nml						
Report	NECK						
Discharge	_nml inspection						
Prescription	_supple						
Excuse	CVS						
Printing	_nml rate/rhythm						
Clinical	_heart sounds nml						
Discharge	RESPIRATORY						
	_no resp distress						
	_breath sounds nml						
	_chest nontender						
	RECTAL						
	_nml rectal exam						
	_heme neg stool						
	_nontender						
	_decreased rectal tone						
	_blood in stool						
	_abnormal digital rectal						
	_pallor						
	_diaphoresis						
	_herpes-like lesion(s)						
	_vaginal discharge						
	_vag. bleeding						
	_IUD string visible						
	_cervical erosion						
	_cervicitis						
	_cervical lesion						
	_cervical discharge						
	_cervical dilation						
	_cervical os open						
	_tissue in os in vagina						
	_cervical effacement						
	_cerv. motion tenderness						
	_bimanual tenderness						
	_pelvic mass						
	_adnexal tenderness						
	_adnexal mass / fullness						
	_retroverted uterus						
	_retroflexed uterus						
	_uterine tenderness						
	_enlarged uterus						
	_decreased rectal tone						
	_blood in stool						
	_abnormal digital rectal						
	_pallor						
	_diaphoresis						

FIG. 31

T-Chart	<div style="text-align: center;"> Clinical Report Hospital Name-- Emergency Department Street Address - 214-555-1212 26-Jul-2001 <hr/> Patient Name: Jane </div>														
Jane															
Home															
Annotations															
L S															
Notes															
Clinical															
History															
Exam															
Course															
Dx1															
Viewing															
Report															
Discharge															
Prescription															
Excuse															
Printing															
Clinical															
Discharge															
Closure															
Signature	<hr/> Physician Signature														

PAST HISTORY
Peptic ulcer, Gall stones, Bowel obstruction

PHYSICAL EXAM
Eyes: Scleral icterus. Pale conjunctivae.
ENT: Ears normal. Nasal discharge present. Dry mucous membranes present.
Neck: Meningeal signs present. Lymphadenopathy present. Thyromegaly.
Abdomen: Obese. Rebound tenderness. Guarding present.
GU: Speculum and bimanual exam performed. Cervical lesion present.
Discharge present from the cervical os.
Skin: Cyanosis. Skin rash.
Neuro: Oriented X 3. No motor deficit. No sensory deficit.

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FIG. 33

T-Chart		EKG / X-RAYS / STUDIES		PROCEDURE NOTES	
Jan	0 EKG_nml 0 CXR_NAD 0 V/Q scan_nml 0 Abdomen_NAD 0 IVP_NAD 0 Other X-rays_neg	0 CT Head_NAD 0 CT Chest_NAD 0 CT Abdomen_NAD 0 Abdominal Sono_NAD 0 Pelvic Sono_NAD 0 Other studies_neg	0 Intubation 0 Ventilator Management 0 Central Line 0 Thrombolytic Therapy 0 Chest tube PROGRESS TIME: now stable unstable sx's gone much better better unchanged exam improved unchanged [APPLY] Evaluation after reassessment. Physical exam findings are unchanged. Evaluation after multiple exams. Physical exam findings are unchanged. The patient's symptoms are unchanged. Evaluation after observation, results of tests back, analgesic and narcotic. Physical exam findings are improved. Symptoms much better. 0 general course 0 Resp / CVS 0 CPR 0 re-evaluation consultation / review of records D/W Dr. old records ordered D/W Dr.(#2) old records reviewed tried - can't contact Dr. records req-unavailable family consultation further history sought hospital admission or transfer admit good condition transfer stable observation status		
Notes	LAB				
Clinical	0 CBC nml except WBC Hgb HCT Plat segs bands lymphs monos 0 COAG PT PTT INR TYPE / Rh Time T & C Type/Rh	0 Chem CMP BMP ISTAT nml except Na K Cl HCO3 Glu_#2 BUN Cr Tol Prol Albumin T.Bili SGOT Alk Phos Ca Mg P04 Amylase Lipase	0 Cardiac Enz nml except CK CKMB myoglobin Troponin T Troponin I 0 Pulse Ox time FI02 O2 sat 0 ABG time FI02 p02 O2 sat pCO2 pH	0 PFTs Peak Flow 0 U/A cath clean nml except WBCs RBCs bacteria blood leuk est nitrite gluc ketones Bili protein HCG sHCG Quant uHCG	

FIG. 34

T-Chart	Clinical Report									
Jane	<div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> <p>Hospital Name-</p> <p>Emergency Department</p> <p>Street Address - 214-555-1212</p> <p>26-Jul-2001</p> </div> <div style="width: 45%;"> <p>Patient Name: Jane</p> </div> </div>									
Annotations										
Clinical										
Viewing										
Report										
Discharge										
Prescription										
Excuse										
Printing										
Closure										
	Physician Signature									

PAST HISTORY

Peptic ulcer, Gall stones, Bowel obstruction

PHYSICAL EXAM

Eyes: Scleral icterus. Pale conjunctivae.

ENT: Ears normal. Nasal discharge present. Dry mucous membranes present.

Neck: Meningeal signs present. Lymphadenopathy present. Thyromegaly.

Abdomen: Obese. Rebound tenderness. Guarding present.

GU: Speculum and bimanual exam performed. Cervical lesion present. Discharge present from the cervical os.

Skin: Cyanosis. Skin rash.

Neuro: Oriented X 3. No motor deficit. No sensory deficit.

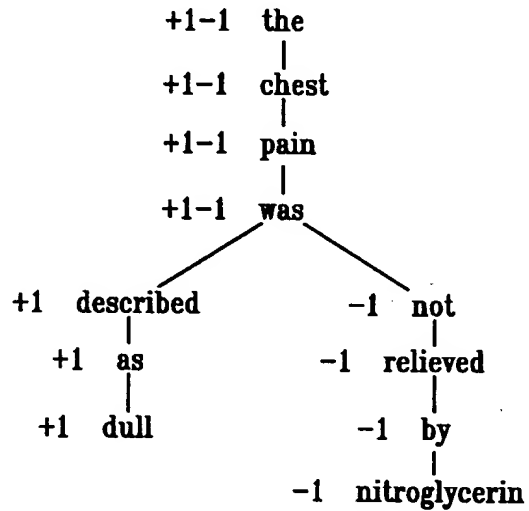
PROGRESS AND PROCEDURES

E.D. Course: Evaluation after reassessment. Physical exam findings unchanged.

Evaluation after multiple exams. Physical exam findings are unchanged. The patient's symptoms are unchanged.

Evaluation after observation, results of tests back, analgesis and narcotic. Physical exam findings are improved. Symptoms much better.

FIG. 35



the chest pain was described as dull
the chest pain was not relieved by nitroglycerin

FIG. 36

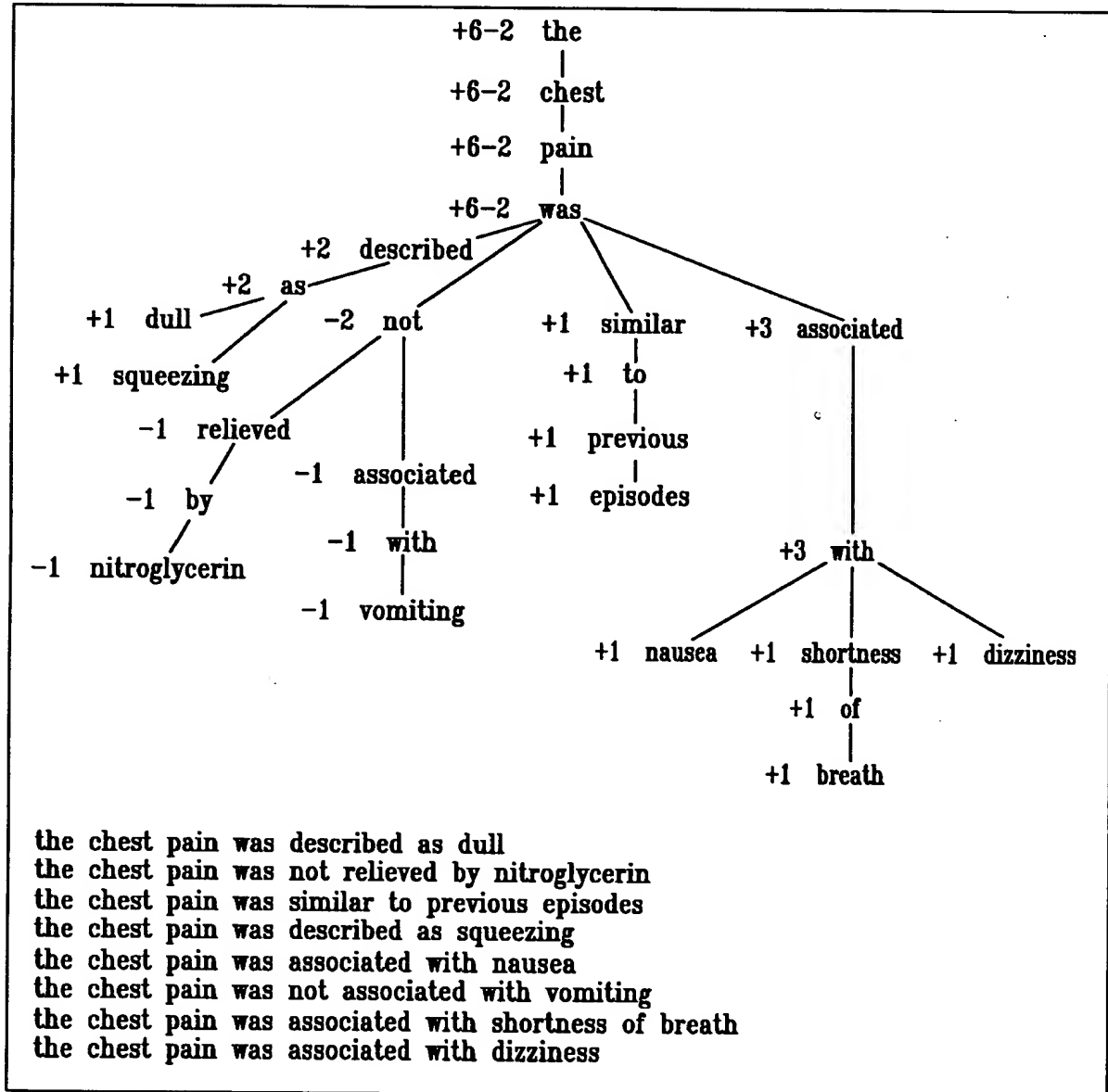


FIG. 37

Test TSysTPRL

Generate

Min Text

Space

Semicolon

Comma

Crunch

the patient has had a prior history of ** cancer of the stomach

the patient has had a prior history of ** cancer of the brain

the patient has had a prior history of ** diabetes

the patient has had a prior history of ** congestive heart failure

the patient has had a prior history of ** gout

the patient has had a prior history of ** ingrown toenails

the patient has had a prior history of ** alcohol abuse

the patient has had a prior history of ** scabies

The patient has had a prior history of cancer of the stomach, cancer of the brain, diabetes, congestive heart failure, gout, ingrown toenails, alcohol abuse and scabies.